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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION	Attorney Docket Number First Named Inventor	1781 Joar Vaage	
	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number		
X Declaration Submitted OR with Initial Filing Submitted after Initial Filing (aurcharge (37 CFR 1.16 (a)) required)	Filing Date		
	Group Art Unit		
	Examiner Name		
believe I am the original, first and sole inventor (if only one na names are listed below) of the subject matter which is claimed	rme is ilsted below) or en original, and for which a patent is sought o	first and joint inventor (if plural on the invention entitled:	
A METHOD AND AN APPARATUS FOR STER			
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the specification of which is attached hereto 03/02/2000 as United States Application Number or PCT International was filed on (MM/DD/YYY and was amended on (MM/DD/YYY) (If applicable). Application Number | PCT/NOOO/00076 I hereby state that I have reviewed and understand the contents of the above identified specification, including the cisims, as amended by any amendment specifically referred to above.

i acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-pert applications, material information which became available between the filing data of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(a) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have sits identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is dalmed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYY)	Priority Not Claimed	Certified Copy Attached? YES NO
19991265	Norway	03/15/1999		

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SR/02B attached herato:

[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application

Customer Number or Bar Code Lebel OR Correspondence address below						
PATENT TRADEMARK CEPICE Name						
Address ':						
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are balleved to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jespendize the validity of the application or any patent tasued thereon.						
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor						
Given Name Joar Family Name Vaage (first and middle [if any])			Vaage			
Inventor's Signsture Date 10.09.01						
Residence: City StaVander	State	Country North	vay Citizenship Norwegian			
Malling Address Karlsminnegt. 24, N-4014 Stavenger, Stavenger						
City Stavanger	State	ZIP	Country Norway			
NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor						
Family Name First and middle [if any]) or Surname						
Inventor's Signature Dete						
Residence: City	State	Country	Citizenship			
Mailing Address						
City	State	ZIP	Country			
Additional inventors are being named on thesupplemental Additional inventor(s) sheet(s) PTO/SB/02A attached herets.						

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Under the Paperwork Regulation Act of 1885, no persone are required to respond to a collection of information unless it display a valid OMB control number. Application Number Filing Date Joar Vaage First Named Inventor METHOD AND AN APPARATUS FOR POWER OF ATTORNEY OR Title **AUTHORIZATION OF AGENT Group Art Unit** Examiner Name 1781 Attorney Docket Number I hereby appoint: X Practitioners at Customer Number Practitioner(s) named below: Registration Number Name as my/our attorney(a) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Place Customer **Q**R Number Bar Code Practitioners at Customer Number Label here OR Firm or Individual Name Address Address ·Zip State City Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Joar Vaage Name **Signature** 10.09.01 NOTE: Signatures of all the inventors or assigneds of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature to required, see below. forms are submitted.

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